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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. MERITAGE HOMES CORPORATION PAC 8800 East Raintree Drive ADDRESS (number and street) Suite 300 (Check if address is changed) SCOTTSDALE 85260 ΑZ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Hilla.Sferruzza@Meritagehomes.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00494211 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Hilla Sferruzza Type or Print Name of Treasurer Hilla Sferruzza [Electronically Filed] 04 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

	FEC Fo i	rm 1 (Revised 02/2009)	Page 2				
		OMMITTEE • Committee:					
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)					
Nam Cand	e of didate						
	didate / Affiliatio	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Nam Cand	e of didate						
Par	ty Con	ommittee: (National, State (Democratic,					
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party				
Poli	tical A	ction Committee (PAC):					
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected							
		X Corporation Corporation w/o Capital Stock	Labor Organization				
		Membership Organization Trade Association	Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party				
In addition, this committee is a Lobbyist/Registrant PAC.		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Join	t Fund	raising Representative:					
(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t					
(h)		committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.					
	Committees Participating in Joint Fundraiser						
	1.						
	2.						
	3.						
	4.	FEC ID number C					

	-				
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V	/rite or Type Committee Name				J
ľ	MERITAGE HO	MES CORPORATION	ON PAC		
<u></u>	Name of Any Connected (Organization, Affiliated Committee, Jo	int Fundraising Rep	resentative, or L	eadership PAC Sponsor
M	leritage Homes Corp	oration			
Ľ					
	Mailing Address	17851 N. 85th St.			
		Scottsdale		AZ 8	5255
		CITY		STATE	ZIP CODE
	Relationship: X Connected	d Organization Affiliated Committee	Joint Fundraising	Representative	Leadership PAC Sponsor
	Custodian of Records: Ider books and records.	ntify by name, address (phone number	optional) and positi	ion of the perso	n in possession of committee
	Hilla Sferr	11772			
	Full Name				
	Mailing Address	8800 East Raintree Drive			
		Suite 300			
		Scottsdale		AZ E	35360
	Tu 5 11				
	Title or Position	CITY		STATE	ZIP CODE
	Treasurer		Telephone nun	nber	
	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) c	of the treasurer of the	e committee; and	the name and address of
	Full Name Hilla Sferro	ızza			
	Mailing Address	8800 East Raintree Drive			
	Walling Address	Suite 300			
		Scottsdale		AZ 8	5360
		CITY		STATE	ZIP CODE
	Title or Position Treasurer				0002
			Telephone num	nber	

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Full Name of Designated Tin Agent	m White						
Mailing Address	17851 N. 85th St.						
		05055					
	Scottsdale AZ CITY STATE	85255 ZIP CODE					
Title or Position Assistant Treasurer							
safety deposit boxes Name of Bank, Depo	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Bank of America						
Mailing Address	275 Valencia Ave.						
g . (uui 000							
	Brea CA	92823					
	CITY STATE	ZIP CODE					
Name of Bank, Depository, etc.							
L							
Mailing Address							
Mailing Address							
Mailing Address							